







Social determinants of health that impact the experience of immigration in Brazil

Determinantes sociais da saúde que impactam a vivência da imigração no Brasil

Determinantes sociales de la salud que impactan la experiencia de la inmigración en Brasil

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ABSTRACT

Objective: to understand the perceptions of Haitian immigrants about the social determinants of health that impact on the experience of immigration. **Method:** this qualitative, participant action study was based on Paulo Freire's research itinerary, which consists of three phases: thematic research; encoding and decoding; and critical unveiling. A "culture circle" was held, after ethics committee approval, in the second half of 2019, with the participation of 12 immigrant Haitian university students residing in western Santa Catarina, Brazil. **Results:** in the dialogues, two themes emerged for discussion as representing the social determination of health and disease: immigrants' health in Brazil; and challenges of studying and working. **Conclusion:** inequity in access to rights, lack of time to sleep and exercise, homesickness for Haiti, financial difficulties, adaptation to Brazilian culture, and discrimination were identified as determinant factors that affect health. There is an urgent need to build public policies to guarantee immigrants' rights in Brazil.

Descriptors: Public Health Nursing; Social Determinants of Health; Emigrants and Immigrants; Health Vulnerability.

RESUMO

Objetivo: compreender as percepções dos imigrantes haitianos sobre os Determinantes Sociais da Saúde que impactam a vivência da imigração. **Método:** pesquisa qualitativa, do tipo pesquisa ação participante, fundamentada no Itinerário de Pesquisa de Paulo Freire, que constitui três fases: Investigação Temática; Codificação e Descodificação; Desvelamento Crítico. Realizou-se Círculo de Cultura, no segundo semestre de 2019, com a participação de 12 imigrantes haitianos, estudantes universitários, residentes no oeste de Santa Catarina, Brasil, após aprovação pelo Comitê de Ética em pesquisa. **Resultados:** nos diálogos emergiram duas temáticas para discussão como determinação social da saúde e doença: saúde do imigrante no Brasil; desafios de estudar e trabalhar. **Conclusão:** A iniquidade de acesso aos direitos, escasso tempo para dormir e praticar exercícios físicos, saudade do Haiti, dificuldade financeira, adaptação à cultura brasileira e discriminação foram apontados como fatores determinantes que afetam a saúde. Urge a necessidade da construção de políticas públicas que garantam os direitos dos imigrantes no Brasil.

Descritores: Enfermagem em Saúde Pública; Determinantes Sociais da Saúde; Emigrantes e Imigrantes; Vulnerabilidade em Saúde.

RESUMEN

Objetivo: comprender las percepciones de los inmigrantes haitianos sobre los determinantes sociales de la salud que impactan en la experiencia de la inmigración. **Método:** este estudio cualitativo de acción participante se basó en el itinerario de investigación de Paulo Freire, que consta de tres fases: investigación temática; codificación y decodificación; y revelación crítica. Se realizó un "círculo cultural", luego de la aprobación del comité de ética, en el segundo semestre de 2019, con la participación de 12 estudiantes universitarios haitianos inmigrantes residentes en el occidente de Santa Catarina, Brasil. **Resultados:** en los diálogos surgieron dos temas de discusión que representan la determinación social de la salud y la enfermedad: la salud de los inmigrantes en Brasil; y desafíos de estudiar y trabajar. **Conclusión:** la inequidad en el acceso a los derechos, la falta de tiempo para dormir y hacer ejercicio, la nostalgia por Haití, las dificultades económicas, la adaptación a la cultura brasileña y la discriminación fueron identificadas como factores determinantes que afectan la salud. Urge construir políticas públicas para garantizar los derechos de los inmigrantes en Brasil.

Descriptor: Enfermería de Salud Pública; Determinantes Sociales de la Salud; Emigrantes e Inmigrantes; Vulnerabilidad em Salud.

INTRODUCTION

Contemporary immigration is global, with Brazil having received immigrants from several nations and for heterogeneous reasons¹. When observing the international migration processes to Brazil, it is evident that Haitians gained prominence due to the volume of migratory movements in search of work, far from the consequences of earthquakes². In addition, there is an agreement between the Haitian and Brazilian governments, mediated by the United Nations (UN), which facilitated the integration of these immigrants by providing registration in the national register of natural persons, allowing for agile inclusion in the labor market³.

Immigrants constitute a vulnerable population to several Social Determinants of Health (SDHs), defined as factors that influence, affect and/or determine people's health. It should be noted that the balance of the health-disease

process is determined by multiple factors of social, economic, cultural, environmental and biological origin. However, despite the fact that factors external to the individual are known internationally, they were not always contemplated when formulating health policies⁴, needing to understand them in order to create intervention strategies appropriate to reality, in favor of quality of life⁵.

In this scenario, it is urgent to carry out research studies that make it possible to know the reality of immigrants and that contribute to the elaboration of policies and practices that unveil the SDHs that involve this population. Therefore, nurses and other health professionals will be able to positively intervene in the SDHs, seeking to reduce the vulnerabilities of this population, justifying the relevance of this study.

Thus, the following guiding question emerged: What are the perceptions of Haitian immigrants about the SDHs that impact on the immigration experience? Therefore, the study aimed to understand the perceptions of Haitian immigrants about the SDHs that impact on the immigration experience.

THEORETICAL FRAMEWORK

The study was based on Paulo Freire's theoretical and methodological assumptions, considering that every individual has knowledge that should be valued, with the encouragement of autonomy, instigating knowledge and empowerment through dialogical praxis, which occurs in the Culture Circle^{6,7}.

The Culture Circle is a meeting of people who discuss common themes through dialog, in horizontal and reflective relationships, sharing experiences. It is mediated by a facilitator who discusses emerging issues, aiming to instigate collective knowledge, in which all the participants become enriched and transformed^{7,8}. In this space, possibilities for researchers and nurses to establish bonds emerge, in favor of the health and empowerment of the immigrants.

METHOD

A qualitative research study, of the participant action type⁹, in which the study results in a practical and concrete action, considering research as a pedagogical process interconnected to social transformation⁸. It was based on Paulo Freire's Research Itinerary, consisting in three phases: 1) Thematic Research: the moment to identify the generating themes; 2) Coding and Decoding: elaboration of codes that encourage critical reflection on the situation experienced, reflecting on overcoming extreme situations; 3) Critical Unveiling: socialization and consolidation of ideas under a critical reflection of reality, providing an understanding of how to act to transform^{6,7}.

To organize the Culture Circle, an email was sent to the 91 Haitian students from a public university in western Santa Catarina, inviting them to participate in a meeting. 22 students from different periods attended, reconciling schedules with 12 of them, who thus became the study participants. As inclusion criteria, Haitian immigrants over 18 and university students were considered. The exclusion criterion corresponded to those who did not regularly attend classes.

The Circle lasted two hours and was held in a classroom of the university in the second semester of 2019. There was the aid of an audio recorder. To make the discussion on the SDHs concrete and interactive, it was decided to go through the stages of the Itinerary through an analogy with the symbolic construction of a tree, making it possible to carry out all the phases of the Itinerary in a single meeting. A paper tree was built and exposed to the floor, the pieces of which were assembled during the meeting.

For Thematic Investigation (data collection), the mediator instigated dialog with the following question: What impacts health in the immigration experience in Brazil? Each participant received a piece of paper representing the roots of the tree, and was invited to answer the question with only one word. The immigrants shared their perceptions with the group, exposing the tree's roots to the floor. After an ample debate, two generating themes were defined for discussion in the Circle: immigrants' health in Brazil; and the challenges of studying and working.

In the Coding and Decoding stage (data collection and analysis), the stem of the tree was assembled and divided into two parts. The first approached the SDHs that involved the health of Haitian immigrants, by asking the following question: How is the health of immigrants in Brazil? The second part of the stem was intended to debate the challenges of studying and working at the same time, with the following question: What is it like to be an immigrant student and worker?

In Critical Unveiling (data analysis), the participants inserted the leaves of the tree, reflecting on which SDH would have the greatest impact on their lives and how they intended to promote their health. All were fed back from collective reflections, with new knowledge and possibilities emerging.

The dialogs of the Culture Circle were transcribed and organized in digital folders, according to the two themes. For data analysis, a detailed reading of these pieces of information recorded in the folders was performed. Such analysis

was performed in a concomitant manner to the development of the Circle, as provided in Paulo Freire's Itinerary⁶, in which the participants expressed the conceptions related to the themes, making them more visible.

The research followed the ethical precepts of Resolution 466 of 2012, emphasizing that the immigrants signed the Free and Informed Consent Form. To guarantee their anonymity, they were named after trees. The research was approved on May 19th, 2019, by the Research Ethics Committee of the Federal University of the South Border, under opinion number 3,324,430.

RESULTS

The 12 participants were aged between 21 and 25 years old, nine of them were male and three were female, living in Brazil for between five months and six years. As for the university courses: one was a Nursing student; three were studying Pedagogy; two attended the Environmental Engineering course, two were studying Geography; two, Mathematics; and two, Letters.

Immigrants' health in Brazil

The participants indicated the difficulties found as the social determination of the health-disease process in the immigration experience, revealing the challenge to maintain healthy eating habits, due to economic issues:

The whole market that's healthy is expensive. I buy what my money can buy, then it's difficult to eat healthy. (Bamboo)

The participants also highlighted lack of time to practice physical exercise so as to lead a healthier life: I like doing exercises, but I don't have time. (Jatoba)

The Haitians reported having difficulties in establishing friendships with Brazilians, missing their family, which creates sadness:

Here we have few friends, so the longing for the family is even greater. That makes me sad. (Fig tree)

The challenge of learning Portuguese was discussed:

Adaptation at the beginning wasn't easy... Portuguese is a challenge, the language is difficult. Not knowing what they're talking about is not cool. (Chestnut tree)

Another issue raised in the dialogs was their longing for the Haitian culture and the different ways of worshipping God in the church:

I miss the Haiti culture, the way we live there. (Jujube tree)

Many things are different here, even in the church, they don't make much noise. We seem like strangers to them. (Bamboo)

Some Haitians have shown frustration with the Brazilians, who show little or no interest in knowing their country and their life stories. They also stated that lack of information generates inequality in the immigration experience:

Here it seems that people are not curious to know about Haiti or about our lives. We have to know everything about Brazil, but the Brazilians generally don't want to know anything about us. (Rubber tree)

In Brazil there are different laws and we don't know them, we don't know about our rights here. Hence, equality is lacking because in many places, we are not treated the same as the Brazilians. (Olive tree)

The challenges of studying and working

The Haitian immigrants discussed that, when they arrived in Brazil, they found opportunities to study in the universities, but they faced lack of support from the professors in this process, facing prejudice:

The professor needs to work on inclusion, he has to understand that there are not only Brazilians in the classroom. There are immigrants who sometimes just arrived in Brazil and don't speak Portuguese very well. Lack of support from the professors. (Pine tree)

There was a girl who scored 7.5. The professor congratulated that student. And my friend, who is Haitian, scored 10 and received no congratulations. That is prejudice. (Bamboo)

For Haitian immigrants, the opportunity to pursue higher education is the fulfillment of a dream. However, for this dream to become possible, it is sometimes necessary to study and work, which hinder academic permanence:

There was a Haitian immigrant who tried to take a full course and work at night, but he didn't sleep and ended up getting sick and giving up studying. (Jatoba)

But the difficulties experienced and the excess of responsibilities impair health:

We have many things to do at the university and at work. We don't have time to rest and sleep a whole night and we end up with some disease. (Jujube tree)

When they were asked about work, it was verified that most of the respondents found job opportunities only in slaughterhouses, suffering discrimination for being foreign and black-skinned:

Because I'm a foreigner and also because I'm black, they refuse to give me a good job, this is discrimination and prejudice. (Cedar tree)

Many immigrant workers are discriminated, without the same opportunities as the Brazilians. (Jujube tree)

At the end of the Culture Circle, it was revealed that the immigrants were transformed, exchanging experiences in search of possibilities to promote their well-being and self-care, with gratitude for the moments experienced, showing empowerment and the desire that the results bring improvement and new reflections on the immigrants' health:

I want to thank you because I learned a lot. I'll go out different than when I came. (Jujube tree)

I hope that we take more care of our health, that we can empower ourselves, seek our rights. That this research brings about many results because someone needs to see that and you're concerned with the immigrants' health. (Bamboo)

DISCUSSION

Many SHDs impact on the immigration experience. Human beings have rights, one of them being healthy eating. However, currently, food is distributed according to the offer and demand law¹⁰. Physical inactivity is another factor that is directly linked to the reduction in quality of life, to the increase in the number of diseases, to obesity, and to mortality. Physical and/or leisure activities are subsidies for prevention and health promotion, resulting in an improvement in the perception of health¹¹.

As for mental health, it should be noted that during the settlement process, lack of friends can trigger isolation¹². Added to this, mastering the language presents itself as a need and not as a choice, as it has a recurrent impact on the immigrants' lives in their search for work opportunities, education, health, and new friends, among others¹³.

Participating in a church, maintaining the Haitian religiosity, is a remarkable function in the sense of maintaining spiritual health, having a symbolic connection with the country of origin. However, there is an impact in view of family uprooting and the difficulties of insertion in a new culture, as evidenced by estrangement in the church, which can cause isolation, discouragement and longing¹⁴. This confrontation of values that subsidize the identities of both the receiving society and the immigrants can generate difficult relationships due to the differentiation between natives and immigrants¹⁵.

The Migration Law aims to establish some basic principles and guarantees for immigrants, as well as the right to document regularization, a humanitarian welcome, and social and labor inclusion¹⁶. Thus, it is noted that allowing Haitians to enter Brazil is not enough, making it necessary to improve and monitor compliance with the Brazilian legislation so that citizenship rights are met, seeking the dissemination of information, so as to empower their rights and duties to restart their lives in the new country.

Vulnerability is present in the lives of the immigrants and, in order to achieve the equality of the different, it is necessary to offer them special protection, that is, the current Brazilian constitution is extremely careful when referring that the rights are innate to every individual, regardless of whether they are nationals or foreigners¹. Added to this, the Brazilian Unified Health System (*Sistema Único de Saúde*, SUS) advocates the principle of equality for the citizens of the Brazilian territory¹⁷. Therefore, before being a foreigner, immigrants are individuals who have essential rights, which include education.

In this educational scenario, the importance of teaching support emerges to help students in their difficulties, encouraging them to continue their studies. The university space is understood as an adequate place to discuss prejudice and discrimination, not as a space that promotes such situations. In addition, one should think about inclusive education, which, despite being discussed in several sectors, still lacks greater application in the university context regarding the recognition and meeting the needs of each student¹⁵. To effect inclusion, it is essential to formulate aid mechanisms that create real conditions for permanence since, without institutional support, there may be processes of exclusion in the universities.

It is known that there are permanence policies that are offered by the Brazilian government, but that cannot reach all university students, which hinder permanence and excellence, since many are forced to work to be able to study¹⁸, impairing the maintenance of adequate sleep. A significant reduction in the population's sleep time and quality is observed, with repercussions on the psychological function, immune system, performance and mood. Thus, ensuring sleep quality is relevant to lead a health life¹⁹.

Immigrants perform work activities that require little schooling and that demand effort and long hours, with low wages²⁰, emerging from discrimination and prejudice. In racial discrimination, people who are not part of dominant racial groups suffer distinctions due to their skin color, which results in inequality of several resources: educational and

professional opportunities, income and social mobility. Prejudice is related to affective issues, given the preference for one group over another, while discrimination consists of behavior²¹.

In this sense, the stressful events linked to the immigration and acculturation process, added to the presence of discrimination and prejudice, strongly impact on the immigrants' quality of life, influencing the social determination of the health-disease process⁵. It is essential that groups that suffer exclusion processes, such as Haitian immigrants, can verbalize their life experiences, express their needs, and incite spheres of society through strategies to face and overcome their conditions of vulnerability²².

It is suggested to carry out other studies that deal with the living conditions of the immigrants, giving them an active voice, as occurred in the process of this study, which brought contributions to the areas of Nursing, Public Health and Education, instigating professionals and society to mobilize to serve this clientele according to their real needs, giving visibility to this population that so lacks information and guaranteeing rights, in favor of quality of life.

As a limitation of the study, the inclusion of only Haitian immigrants in the research is mentioned. Studies with other nationalities are encouraged in order to understand the impacts of the SDHs in the immigration context, in search of improving policies in the Health, Education and Labor sectors in Brazil.

FINAL CONSIDERATIONS

The SDHs perceived by Haitian immigrants, which impact on the immigration experience, involve the difficulty to consume foods considered healthy because they are of high monetary value, longing for the family and Haitian culture, scarce financial conditions, inequality and difficulty communicating with Brazilians. Lack of time to sleep and to practice physical exercises stood out.

The presence of prejudice and discrimination at work, in social life and at the university was also reinforced, which makes insertion and adaptation in Brazil more difficult. The effects of slavery, still visible in the acts of exploitation, prejudice and discrimination against immigrants, need to be fought against in their broad forms. Thus, actions that reassert equality in diversity through intercultural dialog are urgent, highlighting the relevance of the professor's role as a source of support to overcome barriers at the university.

In this context, there is an urgent need for public bodies and civil society to elaborate public policies that guarantee the rights of immigrants so that they can lead a dignified life in the country to which they belong. Also, that public health Nursing and other professionals in the field can turn their eyes to this population, which so much needs greater visibility and care.

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